

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

14CV4665

#2

FRANK GILLIARD

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

THE CITY OF NEW YORK
PSA7, located at 737 Melrose Avenue
Claimant was transported from PSA7 to
the 40 Precinct located at 257 Alexander
Ave, where his arrest processed by PO
Javish Ortiz (Shield# 006576) and then
taken to Fort Apache at 1086 Simpson Street
for a line-up.

(In the space above enter the full name(s) of the defendant(s). If you
cannot fit the names of all of the defendants in the space provided,
please write "see attached" in the space above and attach an
additional sheet of paper with the full list of names. The names
listed in the above caption must be identical to those contained in
Part I. Addresses should not be included here.)

COMPLAINT

under the
Civil Rights Act, 42 U.S.C. § 1983
(Prisoner Complaint)

Jury Trial: ☐ Yes ☐ No
(check one)

JUN 10 2014
PRO SE OFFICE

I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Frank Gilliard
ID # 241-13-06678
Current Institution Vernon C Bain Center
Address One Halleck Street
Bronx New York 10474

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 2 Name THE CITY OF NEW YORK Shield # _____
 Where Currently Employed PSA7
 Address 737 Melrose Ave

Defendant No. 3 Name The City of New York Shield # _____
 Where Currently Employed 40 Precinct
 Address 257 Alexander Ave

Defendant No. 4 Name The City of New York Shield # _____
 Where Currently Employed Fort Apache
 Address 1086 Simpson Street

Defendant No. 5 Name _____ Shield # _____
 Where Currently Employed _____
 Address _____

II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?

B. Where in the institution did the events giving rise to your claim(s) occur?

C. What date and approximate time did the events giving rise to your claim(s) occur?

D. Facts: The claim arose on or about May 21, 2013 at approximately 03:00 p.m. in front of 225 Willis Avenue in the County of the Bronx when claimant was falsely arrested, falsely imprisoned, and misidentified by several officers from PSA 7, located at 737 Melrose Ave.

What happened to you?

Claimant was transported from PSA 7 to the 40 Precinct located at 257 Alexander Ave, where his arrest processed by PO Javish Ortiz (Shield#006576) and then take to Fort Apache at 1086 Simpson Street

Who did what?

Was anyone else involved?

Who else saw what happened?

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. Claim for physical, emotional, mental, and psychological pain and suffering, embarrassment and humiliation sustained by claimant as a result of intentional, reckless and/or negligent conduct by agents, servants and employees of the City of New York. The claimant was falsely arrested and imprisoned and subjected to illegal search and seizure, malicious prosecution, violations of his right to due process, retaliation for protected First Amendment activity, and his civil rights were violated. U.S. Const. Amend. I, IV & XIV, N.Y. Const. Art. 1, 12.

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes _____ No _____

Facts : for a line-up. The Officers stopped and arrested claimant without probable cause. Claimant was unlawfully detained and subject to an illegal line-up Claimant was subject to unlawful search and seizure.

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes _____ No _____ Do Not Know _____

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes _____ No _____ Do Not Know _____

If YES, which claim(s)? _____

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes _____ No _____

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes _____ No _____

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

1. Which claim(s) in this complaint did you grieve? _____

2. What was the result, if any? _____

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. _____

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: _____

2. If you did not file a grievance but informed any officials of your claim, state who you informed,

when and how, and their response, if any: _____

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. _____

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). Loss of income, Pain and Suffering,
Mental Anguish, Loss of Social Security income, Slander and
Defamation of my name and because of the time I spent
in prison for a Crime I did not commit for (18 Months) I
asked the Court for a Justified compensation.

VI. Previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?
 Yes _____ No _____

On
these
claims

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes _____ No _____

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

On
other
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?
Yes _____ No _____

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes _____ No _____

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) All charges were ultimately dismissed and cleared by the Grand Jury on June 3, 2013.

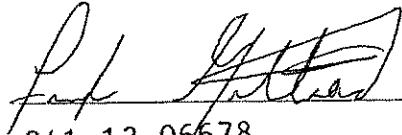
I declare under penalty of perjury that the foregoing is true and correct.

Signed this 31 day of May, 2014.

Signature of Plaintiff

Inmate Number

Institution Address


241-13-06678
Vernon C Bain Center
One Halleck Street
Bronx New York 10474

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 31 day of May, 2014, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

